

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT ▼**Example: If typing, type
over the lines

Cantor For Congress

ADDRESS (number and street)
▼

P. O. Box 17813

☐Check if different
than previously
reported. (ACC)

Richmond

VA

23226

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00355461

3. IS THIS
REPORT ☐NEW
(N)

OR

☒AMENDED
(A)

VA

07

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2005

through

12

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jacquelyn E. Stone

Signature of Treasurer

Electronically Filed by Jacquelyn E. Stone

Date

03

20

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Cantor For Congress

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 5

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	236180.00	1464170.57
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	235680.00	1463670.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	231258.40	1144350.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3640.65
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	231258.40	1140710.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	554471.46	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
Cantor For Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

98330.00

636980.50

(ii) Unitemized.....

1100.00

28390.07

(iii) TOTAL of contributions

99430.00

665370.57

from individuals..... ▶

0.00

1000.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

136750.00

797800.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)

236180.00

1464170.57

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

3640.65

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

236180.00

1467811.22

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	231258.40	1144350.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	500.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	500.00
21. OTHER DISBURSEMENTS.....	156096.83	311946.83
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	387855.23	1456797.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	706146.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	236180.00
25. SUBTOTAL (add Line 23 and Line 24).....	942326.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	387855.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	554471.46

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate Eric Cantor		Candidate ID Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">H0VA07042</div>
Name of Principal Campaign Committee Cantor For Congress		Committee ID Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00355461</div>
Committee Address P. O. Box 17813		
City Richmond	State VA	ZIP 23226-
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1361511.22</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">106300.00</div>
2. Aggregate amount of contributions from personal funds of the candidate	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
3. Gross receipts minus the candidate's personal contributions	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1361511.22</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">106300.00</div>

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Henry Aboodi		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		3	0		2	0	0	5													
Mailing Address 22 Heathcote Rd.		Transaction ID: 60109.C15209																				
City State Zip Code Scarsdale NY 10583		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Alpine Capital	Occupation Investor																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																				
2000.00																						

B. Full Name (Last, First, Middle Initial) Dennis Albers		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	4		2	0	0	5													
Mailing Address 1999 Harrison Street, Ste. 655		Transaction ID: 60109.C15142																				
City State Zip Code Oakland CA 94612		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Albers Enterprises																						
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																				
250.00																						

C. Full Name (Last, First, Middle Initial) Isaac Applbaum		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		3	1		2	0	0	5													
Mailing Address 837 Longridge Road		Transaction ID: 60124.C15289																				
City State Zip Code Oakland CA 94610-6297		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Lightspeed Venture Partners																						
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																				
500.00																						

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Linwood Attkisson

Mailing Address P.O. Box 1775

City State Zip Code
 Ashland VA 23005-9730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ashland Milling Company

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 7 / 2 0 0 5

Transaction ID: 60109.C15107

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

H. Lee Barfield

Mailing Address 1026 Chancery Lane

City State Zip Code
 Nashville TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bass Berry & Sims PLC

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15158

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Nathan Barry

Mailing Address Union Wharf Condominium
 343 Commercial St., Unit 301

City State Zip Code
 Boston MA 02109-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nathan Barry Associates

Occupation
Real Estate Management

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: 60109.C15224

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Daniel Berns
Mailing Address 388 Beale St., #1303

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Investor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15132

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George Bishop
Mailing Address 511 Union Street, Suite 2700

City State Zip Code
Nashville TN 37219-8966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15176

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David Blumberg
Mailing Address 580 Howard St.
Ste. 401

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blumberg Capital

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 60109.C15164

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Daniel Boschwitz

Mailing Address 1623 Cedar Lake Parkway

City State Zip Code
 Minneapolis MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Home Valu

Occupation
Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15134

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Thomas Boschwitz

Mailing Address 4020 Beards Ave. S

City State Zip Code
 Minneapolis MN 55410-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Home Valu

Occupation
Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15135

Amount of Each Receipt this Period

350.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Robert Boston

Mailing Address 1125 Gateway Ln

City State Zip Code
 Nashville TN 37220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15179

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Jack Bovender

Mailing Address 520 Belle Meade Blvd.

City State Zip Code
 Nashville TN 37205

FEC ID number of contributing federal political committee.

C

Name of Employer
HCAOccupation
Chairman & CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15149

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Richard Bracken

Mailing Address 1106 Belle Meade Blvd.

City State Zip Code
 Nashville TN 37205

FEC ID number of contributing federal political committee.

C

Name of Employer
HCAOccupation
President & COO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15156

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. James Bristol

Mailing Address 511 Union Street, Suite 2700

City State Zip Code
 Nashville TN 37219

FEC ID number of contributing federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,Occupation
Attorney at Law

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15188

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Edgar Bronfman

Mailing Address Warner Music Group
75 Rockefeller Plaza

City State Zip Code
New York NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Warner Music Group

Occupation
President & CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15079

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Brian Browder

Mailing Address 6124 Bresslyn Rd.

City State Zip Code
Nashville TN 37205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15174

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Alex Buchanan

Mailing Address 1115 Belle Meade Blvd.

City State Zip Code
Nashville TN 37205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15180

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Natalie Bush Mailing Address 808 Duncan Pl. City State Zip Code Manhattan Beach CA 90266 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 51006.C15074 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Wesley Bush Mailing Address 808 Duncan Pl. City State Zip Code Manhattan Beach CA 90266 FEC ID number of contributing federal political committee. C Name of Employer Northrup Grumman Corp. Occupation CFO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 51006.C15073 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Diane Cadman Mailing Address 16 Hixon St. City State Zip Code Bellingham MA 02019 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5 Transaction ID: 60109.C15255 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Ralph Cadman

Mailing Address 16 Hixon St.

City State Zip Code
 Bellingham MA 02019

FEC ID number of contributing federal political committee.

C

Name of Employer
The Interface GroupOccupation
Treasurer

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15253

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Ellen Calmas

Mailing Address 52 Fairway Rd.

City State Zip Code
 Chestnut Hill MA 02467

FEC ID number of contributing federal political committee.

C

Name of Employer
N/AOccupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15257

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Richard Calmas

Mailing Address 52 Fairway Rd.

City State Zip Code
 Chestnut Hill MA 02467

FEC ID number of contributing federal political committee.

C

Name of Employer
Interface GroupOccupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15256

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Victor Campbell

Mailing Address 1307 Chickering Rd.

City State Zip Code
Nashville TN 37215-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
Senior Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15148

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Laurence Chafetz

Mailing Address 195 Woodward St.

City State Zip Code
Waban MA 02468-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
CC&S Development

Occupation
Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15251

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Rachel Chafetz

Mailing Address 195 Woodward St.

City State Zip Code
Waban MA 02468-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15252

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Carole Chaiken Mailing Address 1177 Estates Drive City State Zip Code Lafayette CA 94549 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 60109.C15130 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Theodore Chandler Mailing Address 761 Double Oak Lane City State Zip Code Manakin Sabot VA 23103 FEC ID number of contributing federal political committee. C Name of Employer LandAmerica Financial Group Occupation President and CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 5 Transaction ID: 60109.C15106 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Pamela Cutler Mailing Address 71 Donna Rd. City State Zip Code Newton MA 02459 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5 Transaction ID: 60109.C15261 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Robert Cutler Mailing Address 71 Donna Rd. City State Zip Code Newton MA 02459 FEC ID number of contributing federal political committee. C Name of Employer GWV International Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5 Transaction ID: 60109.C15262 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Thomas Davis Mailing Address 1455 Pennsylvania Ave. NW Suite 1200 City State Zip Code Washington DC 20004 FEC ID number of contributing federal political committee. C Name of Employer Davis and Harman Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: 51011.C15089 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Del Rey Shores North Mailing Address 4201 Via Marina City State Zip Code Marina Del Rey CA 90292 FEC ID number of contributing federal political committee. C Name of Employer Partnership Occupation Partnership Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: 60109.C15167 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Benson Dendy

Mailing Address 1142 West Ave.

City State Zip Code
 Richmond VA 23220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vectre Corporation

Occupation
Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15248

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

James Derderian

Mailing Address 4720 32nd Street North

City State Zip Code
 Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stanton Park Group, LLC

Occupation
Government Relations

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15075

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

James Earle

Mailing Address 611 Commerce Street, Ste. 3125

City State Zip Code
 Nashville TN 37203

FEC ID number of contributing
federal political committee.

C

Name of Employer
DC Telecom, Inc.

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 5

Transaction ID: 60109.C15172

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Richard Edson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 7800 Stable Way		Transaction ID: 51006.C15080
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer ADH, Inc.	Occupation Real Estate Development	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Jerry Epstein		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address c/o Del Rey Shores North 4201 Via Marina		Transaction ID: 60109.C15168
City Marina Del Rey	State CA	Zip Code 90292
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Del Rey Shores North	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	
		Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Gary Erlbaum		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5
Mailing Address 44 W Lancaster Ave. Ste. 110		Transaction ID: 60109.C15275
City Ardmore	State PA	Zip Code 19003-1339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Private Investor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. J.A. Farber

Mailing Address 83 Paseo Mirasol

City State Zip Code
Belvedere Tiburon CA 94920

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quellos Group LLC

Occupation
Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15120

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. John Feehery

Mailing Address 812 C Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Motion Picture Assoc. of
Ameri

Occupation
Executive Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15071

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Gary Fenchuk

Mailing Address East-West Partners
14700 Village Square Pl.

City State Zip Code
Midlothian VA 23112-2253

FEC ID number of contributing
federal political committee.

C

Name of Employer
East West Partners of VA

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15200

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) David Fineman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address 40 Lincoln Avenue		Transaction ID: 60109.C15138
City Oakland	State CA	Zip Code 94611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kindred Inc.	Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Edward Forst		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5
Mailing Address 47 Valley Road		Transaction ID: 60109.C15267
City Bronxville	State NY	Zip Code 10708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Goldman Sachs	Occupation Chief Administrative Officer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

C. Full Name (Last, First, Middle Initial) Frank Foster		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address P.O. Box 948		Transaction ID: 60109.C15150
City Brentwood	State TN	Zip Code 37024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Interior Design Services, Inc.	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)

3350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Steven Fredman

Mailing Address 49 Standish Dr.

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schulte Roth and Zabel

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15214

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Norman Freidkin

Mailing Address 11819 Piney Glen Ln.

City State Zip Code
 Potomac MD 20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freidkin, Matrone and Horn

Occupation
CPA

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60124.C15285

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Norman Freidkin

Mailing Address 11819 Piney Glen Ln.

City State Zip Code
 Potomac MD 20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freidkin, Matrone and Horn

Occupation
CPA

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15264

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Amy Friedkin Mailing Address 44 Montgomery St., 41st Floor City San Francisco State CA Zip Code 94104 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Community Volunteer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5 Transaction ID: 60109.C15139 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Donald Friend Mailing Address 2955 Lake Street City San Francisco State CA Zip Code 94121 FEC ID number of contributing federal political committee. C Name of Employer Friend and Friend Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5 Transaction ID: 60109.C15210 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Robert Gibson Mailing Address 5041 Park Terrace City Minneapolis State MN Zip Code 55436 FEC ID number of contributing federal political committee. C Name of Employer The Sage Group Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5 Transaction ID: 60109.C15136 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		1750.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Wilson Goh

Mailing Address 2211 Keith Ln.

City State Zip Code
 Midlothian VA 23113-2362

FEC ID number of contributing federal political committee.

C

Name of Employer
Philip Morris USAOccupation
Senior Financial Analyst

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 7 / 2 0 0 5

Transaction ID: 51007.C15082

Amount of Each Receipt this Period

380.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Kevin Green

Mailing Address 9445 Assembly Way

City State Zip Code
 Mechanicsville VA 23116

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
Optometrist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15066

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Francis Greenwall

Mailing Address P.O. Box 21011

City State Zip Code
 Piedmont CA 94620

FEC ID number of contributing federal political committee.

C

Name of Employer
Talcott Holdings Ltd.Occupation
Investor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15217

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

880.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Jay Grinney
Mailing Address 3179 Overhill Rd.

City State Zip Code
Birmingham AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Healthsouth Corporation

Occupation
President & CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15152

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Guy
Mailing Address 6856 River Ridge Dr.

City State Zip Code
Nashville TN 37221-3379

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15185

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John M. Guzik
Mailing Address 7908 Oak Hollow Lane

City State Zip Code
Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Williams Mullen Strategies

Occupation
Government Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15265

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Deborah Hackman

Mailing Address 5418 Newbys Bridge Rd.

City State Zip Code
 Chesterfield VA 23832-7535

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freedom, Inc. Home Health

Occupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 4 / 2 0 0 5

Transaction ID: 60109.C15198

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Jake Hansen

Mailing Address 6653 Scottswood St.

City State Zip Code
 Alexandria VA 22315

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barr Labs

Occupation
Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 5

Transaction ID: 60109.C15173

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Robb Harvey

Mailing Address 5512 S. Stanford Drive

City State Zip Code
 Nashville TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15178

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Samuel Hazen
Mailing Address 1205 Waterstone Blvd.

City State Zip Code
Franklin TN 37069

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
President-Western Group

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15147

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Head
Mailing Address 116 Galway Lake S.

City State Zip Code
Hendersonville TN 37075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15184

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Herson
Mailing Address 8709 Burning Tree Road

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Defense Internat-
ional

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 51011.C15086

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Milton Herson		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	7		2	0	0	5													
Mailing Address 17173 Royal Cove Way		Transaction ID: 51007.C15085																				
City Boca Raton	State FL	Zip Code 33496																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00																				
Name of Employer N/A	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00																					

B. Full Name (Last, First, Middle Initial) Vicki Herson		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	7		2	0	0	5													
Mailing Address 8709 Burning Tree Road		Transaction ID: 51007.C15084																				
City Bethesda	State MD	Zip Code 20817																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00																				
Name of Employer N/A	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00																					

C. Full Name (Last, First, Middle Initial) E. Brent Hill		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	4		2	0	0	5													
Mailing Address 917 Cherry Plum Ct.		Transaction ID: 60109.C15187																				
City Nashville	State TN	Zip Code 37215-6158																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00																				
Name of Employer Waller Lansden Dortch & Davis,	Occupation Attorney at Law	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00																					

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) John Hill Mailing Address 600 Hillwood Blvd. City Nashville State TN Zip Code 37205 FEC ID number of contributing federal political committee. C Name of Employer Waller Lansden Dortch & Davis, Occupation Attorney at Law Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5 Transaction ID: 60109.C15182 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Russell Holdstein Mailing Address Two Buckeye Way City Greenbrae State CA Zip Code 94904 FEC ID number of contributing federal political committee. C Name of Employer Growth Strategies, Inc. Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5 Transaction ID: 60109.C15128 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Alvin Jackson Mailing Address P.O. Box 551 City Kensington State MD Zip Code 20895 FEC ID number of contributing federal political committee. C Name of Employer The Jackson Group Occupation Principal Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5 Transaction ID: 60109.C15270 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. R. Milton Johnson

Mailing Address 4329 Estes Rd.

City State Zip Code
Nashville TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
EVP & CFO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15155

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Charles Jordan

Mailing Address 15460 Journey Ln.

City State Zip Code
Glen Allen VA 23059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Catercorp

Occupation
Owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: 51007.C15081

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. David Kaichko

Mailing Address 103 Galewood Cir.

City State Zip Code
San Francisco CA 94131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15140

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. William Kelly

Mailing Address One American Center
3100 W End Ave., Ste. 904

City State Zip Code
Nashville TN 37203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer Benefits Advisors

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: 60109.C15199

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Cheryl Klaristenfeld

Mailing Address 47 Elmridge Drive

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15211

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Roger Klein

Mailing Address 163 Arlington Ave.

City State Zip Code
Berkeley CA 94707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golden Gate Technology

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15127

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Jay Koppelman

Mailing Address 215 Hillcrest Circle

City State Zip Code
Pleasant Hill CA 94523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Right Trac Financial Group

Occupation
Mortgage Broker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15215

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Daniel Kosowsky

Mailing Address 5 Wilnot Circle

City State Zip Code
Scarsdale NY 10583-6721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan Stanley

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15207

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Ellen KTurchyn

Mailing Address 45 East 66th Street

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pequot Capital

Occupation
Sr. Vice President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15216

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Barbara Kudisch Mailing Address 17 Arlington Rd. City State Zip Code Chestnut Hill MA 02467 FEC ID number of contributing federal political committee. C Name of Employer Dr. Shale, DDS Occupation Dental Hygienist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5 Transaction ID: 60109.C15260 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Clay Kudisch Mailing Address 17 Arlington Rd. City State Zip Code Chestnut Hill MA 02467 FEC ID number of contributing federal political committee. C Name of Employer GWV International Occupation COO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5 Transaction ID: 60109.C15254 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Justin Lilley Mailing Address 5729 Potomac Ave. NW City State Zip Code Washington DC 20016 FEC ID number of contributing federal political committee. C Name of Employer self Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: 51011.C15087 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Patricia Lindler

Mailing Address 806 Foster Hill

City State Zip Code
 Nashville TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
SVP Government Programs

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15154

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Marc Lipschultz

Mailing Address Kohlberg Kravis Roberts & Co.
 9 West 57th Street, Ste. 4200

City State Zip Code
 New York NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kohlberg Kravis Roberts
& Co.

Occupation
Vice President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15213

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Barbara Little

Mailing Address 5315 Glenwood Rd.

City State Zip Code
 Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ethyl Corporation

Occupation
V.P. Government Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15077

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A.

Full Name (Last, First, Middle Initial)

Timothy Locke

Mailing Address 2111 Woodmont Rd.

City State Zip Code
 Alexandria VA 22307

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Smith-Free Group

Occupation
Sr. Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15151

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Terry Long

Mailing Address 3 Blackthorn Rd.

City State Zip Code
 Lafayette CA 94549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Private Investor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15121

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Barry Mannis

Mailing Address 130 Dorchester Rd.

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goldman Sachs & Co.

Occupation
Managing Director

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15208

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 152

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Kent Mason		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	1		2	0	0	5													
Mailing Address 6712 Kenhill Road		Transaction ID: 60109.C15129																				
City State Zip Code Bethesda MD 20817-6016		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">500.00</div>																				
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Davis & Harman	Occupation Attorney																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>																					

B. Full Name (Last, First, Middle Initial) Noel Moore		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	2		2	0	0	5													
Mailing Address 1023 Park Ave.		Transaction ID: 60109.C15226																				
City State Zip Code River Forest IL 60305		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">1000.00</div>																				
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Logos Trading	Occupation President																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div>																					

C. Full Name (Last, First, Middle Initial) Gregory Nickerson		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	5		2	0	0	5													
Mailing Address 8205 Gainsborough Ct. West		Transaction ID: 51006.C15072																				
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">1000.00</div>																				
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Angus & Nickerson, LLC	Occupation Business Consultant																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div>																					

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) James Nixon		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	4		2	0	0	5													
Mailing Address 9413 Lillian Lane		Transaction ID: 60109.C15177																				
City <u>Brentwood</u>	State TN	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Waller Lansden Dortch & Davis,	Occupation Attorney at Law																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																				
200.00																						

B. Full Name (Last, First, Middle Initial) Margaret OConnor		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	7		2	0	0	5													
Mailing Address One Pheasant Run		Transaction ID: 60109.C15258																				
City <u>Norwell</u>	State MA	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer N/A																						
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																				
1000.00																						

C. Full Name (Last, First, Middle Initial) Stephen OConnor		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	7		2	0	0	5													
Mailing Address One Pheasant Run		Transaction ID: 60109.C15259																				
City <u>Norwell</u>	State MA	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer The Interface Group																						
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																				
1000.00																						

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Paul Peck Mailing Address 1428 Daniel Ave. City Norfolk State VA Zip Code 23505-1726 FEC ID number of contributing federal political committee. C Name of Employer The Harbor Group Occupation Real Estate Developer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5 Transaction ID: 60109.C15269 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Henry Plaster Mailing Address 5407 Albemarle St. City Bethesda State MD Zip Code 20816 FEC ID number of contributing federal political committee. C Name of Employer Plaster & Associates, LLC Occupation Director Govt Relations Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5 Transaction ID: 51006.C15076 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) David Pomije Mailing Address 801 Tonkawa Road City Long Lake State MN Zip Code 55356 FEC ID number of contributing federal political committee. C Name of Employer Second Swing, Inc. Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: 51011.C15088 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Patricia Powers
Mailing Address 4405 Curtiswood Cir

City State Zip Code
Nashville TN 37204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15181

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Varda Rabin
Mailing Address P.O. Box 926

City State Zip Code
Belvedere Tiburon CA 94920-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
M&F Counseling Center

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: 60109.C15238

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
G. Scott Rayson
Mailing Address 1162 Gateway Lane

City State Zip Code
Nashville TN 37220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waller Lansden Dortch &
Davis,

Occupation
Attorney at Law

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15175

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Myra Reinhard
Mailing Address 15185 Pepper Lane

City State Zip Code
Saratoga CA 95070-6424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pepper Lane Properties

Occupation
Owner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15218

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Annette Roberts
Mailing Address 287 Langley Rd #21

City State Zip Code
Newton MA 02459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waltham Public Schools

Occupation
Teacher

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15249

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Paul Roberts
Mailing Address 287 Langley Rd. #21

City State Zip Code
Newton MA 02459

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Interface Group

Occupation
Corporate Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15250

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Richard Robertson

Mailing Address 295 Seven Farms Dr. C-177

City State Zip Code
 Charleston SC 29492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 9 / 2 0 0 5

Transaction ID: 60109.C15268

Amount of Each Receipt this Period

800.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Annon Rodan

Mailing Address 6114 La Salle Ave. #442

City State Zip Code
 Oakland CA 94610-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15141

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

John Rogers

Mailing Address 5119 52nd St. NW

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goldman, Sachs & Company

Occupation
Investment Banker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15263

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Richard Rosenberg
Mailing Address 955 Green St. #5

City State Zip Code
San Francisco CA 94133

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: 60109.C15137

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James Sammet
Mailing Address 179 Starfish Court

City State Zip Code
Marina CA 93933

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sammet and Assoc.

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15119

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sharam Sasson
Mailing Address 3049 Oakraider Dr.

City State Zip Code
Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Extensy, Inc.

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15123

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Paul Saunderson
Mailing Address 305 Canterbury Court

City State Zip Code
Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Barney

Occupation
Investment Counselor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15126

Amount of Each Receipt this Period

350.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Stratton Sclavos
Mailing Address P.O. Box 10195 - Dept. 45

City State Zip Code
Palo Alto CA 94303

FEC ID number of contributing
federal political committee.

C

Name of Employer
VeriSign

Occupation
President & CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15078

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jerry Seppala
Mailing Address 215 Lindawood Lane

City State Zip Code
Wayzata MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
Risdall Advertising

Occupation
Vice President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15277

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Daniel Silber		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 80 South Morris Lane		Transaction ID: 60109.C15212
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HSBC	Occupation Currency Trading	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Adam Slovik		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 2100 Green Street #706		Transaction ID: 60109.C15125
City San Francisco	State CA	Zip Code 94123
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self Employed	Occupation High Tech Consultant	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

C. Full Name (Last, First, Middle Initial) Joseph Sowell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 255 Vaughns Gap Road		Transaction ID: 60109.C15183
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Waller Lansden Dortch & Davis,	Occupation Attorney at Law	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Mr. Joe Sowell, III Mailing Address 511 Union Street Suite 2700 City Nashville State TN Zip Code 37219 FEC ID number of contributing federal political committee. C Name of Employer Waller Lansden Dortch & Davis, Inc. Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5 Transaction ID: 60124.C15288 Amount of Each Receipt this Period 1000.00 Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Joe Steakley Mailing Address 115 Savoy Circle City Nashville State TN Zip Code 37205 FEC ID number of contributing federal political committee. C Name of Employer HCA Occupation Sr. VP Internal Audit Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5 Transaction ID: 60109.C15157 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Erin Strawn Mailing Address 25 W. Uhler Ave. City Alexandria State VA Zip Code 22301 FEC ID number of contributing federal political committee. C Name of Employer The Stanton Park Group Occupation Lobbyist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: 51007.C15083 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Jonathan Traub

Mailing Address 1725 Stonebridge Rd.

City State Zip Code
 Alexandria VA 22304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Securities Industry Assoc.

Occupation
VP Fed. Tax Legislation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15145

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Victoria Treyger

Mailing Address 1038 Chestnut St.

City State Zip Code
 San Francisco CA 94109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Travelocity

Occupation
Marketing

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15122

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Ed Vaughn

Mailing Address 305 S. Washington Hwy.
Ste. B

City State Zip Code
 Ashland VA 23005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 5

Transaction ID: 51006.C15067

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Moshe Vizel
Mailing Address 14 Ruzhim Road 101

City State Zip Code
Monroe NY 10950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rosewood Developers

Occupation
Executive Manager

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15276

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Beverly Wallace
Mailing Address 206 Concord Park W.

City State Zip Code
Nashville TN 37205-4711

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
Group President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15146

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Waller Lansden Dortch & Davis PLLC
Mailing Address 511 Union Street, Suite 2700
P.O. Box 198966

City State Zip Code
Nashville TN 37219-8966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Partnership

Occupation
Partnership

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15193

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Mr. Woody Woodruff		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5	
Mailing Address 511 Union Street Suite 2700		Transaction ID: 60124.C15287	
City Nashville	State TN	Zip Code 37219	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]	
Name of Employer Waller Lansden Dortch & Davis,	Occupation Partner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00		
B. Full Name (Last, First, Middle Initial) S.C. Yawitz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 769 Monterey Blvd.		Transaction ID: 60109.C15166	
City San Francisco	State CA	Zip Code 94127-2244	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Yawitz and Associates	Occupation Attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

98330.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Action Committee for Rural Elect. PAC

Mailing Address 4301 Wilson Blvd.

City

Arlington

State

VA

Zip Code

22203-1860

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 60109.C15110

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. AICPA Effective Legislation Committee

Mailing Address Harborside Financial Center
201 Plaza Three

City

Jersey City

State

NJ

Zip Code

07311-3881

FEC ID number of contributing
federal political committee.

C C00077321

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 5

Transaction ID: 60109.C15231

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. American College of Surgeons PAC

Mailing Address 1640 Wisconsin Ave. NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C C00382424

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 5

Transaction ID: 60109.C15163

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. American Electric Power PAC

Mailing Address 1 Riverside Plaza

City State Zip Code
Columbus OH 43215

FEC ID number of contributing
federal political committee.

C C00096842

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: 60109.C15170

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Build PAC

Mailing Address National Association of Home Build
1201 15th St., N.W.

City State Zip Code
Washington DC 20005-2800

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 60109.C15113

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Build PAC

Mailing Address National Association of Home Build
1201 15th St., N.W.

City State Zip Code
Washington DC 20005-2800

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: 60109.C15112

Amount of Each Receipt this Period

4000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Carpenters Legis. Improvement Cmte.
Mailing Address 101 Constitution Ave. NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 5

Transaction ID: 60109.C15229

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CMS Energy Employees for Better Govt.
Mailing Address 212 W. Michigan Ave.

City State Zip Code
Jackson MI 49201

FEC ID number of contributing
federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15244

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Deloitte & Touche Federal PAC
Mailing Address P.O. Box 365

City State Zip Code
Washington DC 20044-0365

FEC ID number of contributing
federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: 60109.C15240

Amount of Each Receipt this Period

4000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Desert Caucus

Mailing Address P. O. Box 31564

City State Zip Code
Tucson AZ 85751

FEC ID number of contributing
federal political committee.

C C00102368

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15143

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Desert Caucus

Mailing Address P. O. Box 31564

City State Zip Code
Tucson AZ 85751

FEC ID number of contributing
federal political committee.

C C00102368

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15144

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Diageo North America PAC

Mailing Address 1301 K Street, NW
Suite 1000 East Tower

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00034470

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: 60109.C15272

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
DuPont Good Government Fund
Mailing Address 1007 Market St.

City State Zip Code
Wilmington DE 19898

FEC ID number of contributing federal political committee. **C** C00171926

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: 60109.C15273

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ernst & Young PAC
Mailing Address 1225 Connecticut Ave., NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: 60109.C15239

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Federal Express PAC
Mailing Address 942 S. Shady Grove Rd.

City State Zip Code
Memphis TN 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: 60109.C15274

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 53 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Federal National Mortgage Assoc. PAC

Mailing Address Fannie Mae PAC

3900 Wisconsin Avenue, NW

City

State

Zip Code

Washington

DC

20016

FEC ID number of contributing
federal political committee.

C C00393520

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: 60109.C15271

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Federation of American Hospitals PAC

Mailing Address 801 Pennsylvania Ave. NW

Ste. 245

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing
federal political committee.

C C00002261

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15161

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Federation of American Hospitals PAC

Mailing Address 801 Pennsylvania Ave. NW

Ste. 245

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing
federal political committee.

C C00002261

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15160

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
First Health Group Corp. PAC (FHGPAC)

Mailing Address 3200 Highland Ave.

City State Zip Code
 Downers Grove IL 60515

FEC ID number of contributing
federal political committee. **C** C00217216

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15203

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Fraternity & Sorority PAC

Mailing Address P.O. Box 50731

City State Zip Code
 Washington DC 20091-0731

FEC ID number of contributing
federal political committee. **C** C00410068

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15242

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Friends of Israel PAC

Mailing Address Attn: Mr. Irwin Bear, Chairman
 P.O. Box 4254

City State Zip Code
 Burlingame CA 94011

FEC ID number of contributing
federal political committee. **C** C00141747

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15205

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) HCA Good Government Fund		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5 Transaction ID: 60109.C15189 Amount of Each Receipt this Period 5000.00
Mailing Address One Park Plaza P.O. Box 550 City Nashville State TN Zip Code 37202-0550 FEC ID number of contributing federal political committee. C C00067231		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		
B. Full Name (Last, First, Middle Initial) HCA Good Government Fund		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5 Transaction ID: 60109.C15190 Amount of Each Receipt this Period 4000.00
Mailing Address One Park Plaza P.O. Box 550 City Nashville State TN Zip Code 37202-0550 FEC ID number of contributing federal political committee. C C00067231		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		
C. Full Name (Last, First, Middle Initial) HealthSouth PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5 Transaction ID: 60109.C15191 Amount of Each Receipt this Period 1000.00
Mailing Address One Healthsouth Pkwy. City Birmingham State AL Zip Code 35243 FEC ID number of contributing federal political committee. C C00414649		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)		10000.00
TOTAL This Period (last page this line number only)		

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Johnson & JohnsonMailing Address Employees Good Government Fund
One Johnson & Johnson PlazaCity State Zip Code
New Brunswick NJ 08933FEC ID number of contributing
federal political committee.**C** C00010983

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15206

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Koch PACMailing Address 655 15th St NW
Suite 445City State Zip Code
Washington DC 20005FEC ID number of contributing
federal political committee.**C** C00236489

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15204

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. KPMG PAC

Mailing Address P.O. Box 18254

City State Zip Code
Washington DC 20036-9998FEC ID number of contributing
federal political committee.**C** C00280222

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15243

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)

Lifepoint Hospitals Inc. PAC

Mailing Address 103 Powell Court, Suite 200

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C C00347955

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15162

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Massachusetts Mutual Life Insurance Co.

Mailing Address MMPAC
1295 State St.

City State Zip Code
Springfield MA 01111-0001

FEC ID number of contributing
federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15246

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Motorola PAC

Mailing Address 1350 I St., NW
Ste. 400

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00075341

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

1 0 / 1 9 / 2 0 0 5

Transaction ID: 60109.C15111

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Motorola PAC Mailing Address 1350 I St., NW Ste. 400 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00075341 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: 60109.C15230 Amount of Each Receipt this Period 3000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Motorola PAC Mailing Address 1350 I St., NW Ste. 400 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00075341 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: 60109.C15228 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) National Beer Wholesalers Assn. PAC Mailing Address 1100 King St., Ste. 600 City Alexandria State VA Zip Code 22314-2944 FEC ID number of contributing federal political committee. C C00144766 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5 Transaction ID: 60109.C15219 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn. PAC
Mailing Address 1100 King St., Ste. 600

City State Zip Code
Alexandria VA 22314-2944

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: 60109.C15220

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Turkey Federation PAC
Mailing Address 1225 New York Ave. NW, Ste. 400

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60109.C15241

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Nestle USA, Inc. PAC
Mailing Address 30003 Bainbridge Rd.

City State Zip Code
Solon OH 44139-2290

FEC ID number of contributing federal political committee. **C** C00087882

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 5

Transaction ID: 60109.C15237

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 152

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
Nisource Inc. PAC

Mailing Address 200 Civic Center Dr.

City State Zip Code
Columbus OH 43215

FEC ID number of contributing
federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 2		1 5		2 0 0 5

Transaction ID: 60109.C15236

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Norfolk Southern Corp Good Govt Fund

Mailing Address Three Commercial Place

City State Zip Code
Norfolk VA 23510-2191

FEC ID number of contributing
federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 2		1 5		2 0 0 5

Transaction ID: 60109.C15233

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Oppenheimer Funds Inc. PAC

Mailing Address 1295 State Street

City State Zip Code
Springfield MA 01111

FEC ID number of contributing
federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 2		2 7		2 0 0 5

Transaction ID: 60109.C15245

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

5000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Pricewaterhouse Coopers PAC

Mailing Address 1900 K. St., N.W.
Suite 900

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: 60109.C15197

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Pricewaterhouse Coopers PAC

Mailing Address 1900 K. St., N.W.
Suite 900

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 5

Transaction ID: 60109.C15201

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Psychiatric Solutions, Inc.

Mailing Address Attn: Brent Turner & Joey Jacobs
840 Crescent Centre Dr., Ste. 460

City State Zip Code
Franklin TN 37067

FEC ID number of contributing
federal political committee.

C C00407684

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: 60109.C15159

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Realtors PAC Mailing Address 430 N Michigan Ave. City Chicago State IL Zip Code 60611 FEC ID number of contributing federal political committee. C C00030718 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: 60109.C15227 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) SBC Communications Inc. Employee Fed PAC Mailing Address 175 E. Houston Room 4-J-01 City San Antonio State TX Zip Code 78205 FEC ID number of contributing federal political committee. C C00109017 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5 Transaction ID: 60109.C15202 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) SRA International, Inc. Fund for Better Mailing Address IT In Government 209 Madison St., Suite 500 City Alexandria State VA Zip Code 22314-1764 FEC ID number of contributing federal political committee. C C00393256 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5 Transaction ID: 60109.C15235 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial) Sun PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 999 Ponce de Leon Blvd. Ste. 625		Transaction ID: 60109.C15232
City Miami	State FL	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00378216		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Time Warner PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 5
Mailing Address 800 Connecticut Ave. NW Suite 200		Transaction ID: 60109.C15195
City Washington	State DC	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C C00339291		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Time Warner PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 5
Mailing Address 800 Connecticut Ave. NW Suite 200		Transaction ID: 60109.C15196
City Washington	State DC	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00339291		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7000.00	

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 152

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Triad Good Government Fund

Mailing Address 5800 Tennyson Pkwy.

City	State	Zip Code
Plano	TX	75024

FEC ID number of contributing
federal political committee.**C** C00347062

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	5

Transaction ID: 60109.C15115

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Truck PACMailing Address American Trucking Association
430 First St. SE

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.**C** C00002881

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	5

Transaction ID: 60109.C15114

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Universal Music Group PACMailing Address Attn: Matthew T. Gerson
600 14th Street, NW Suite 600

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing
federal political committee.**C** C00392464

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	0	5

Transaction ID: 60109.C15171

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cantor For Congress

A. Full Name (Last, First, Middle Initial)
USAA Group PAC

Mailing Address 1455 F St., NW
Ste. 420

City State Zip Code
Washington DC 20004-1004

FEC ID number of contributing
federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 5

Transaction ID: 60109.C15234

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
USTeam PAC

Mailing Address 100 West Putnam Ave.

City State Zip Code
Greenwich CT 06830

FEC ID number of contributing
federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: 60109.C15169

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Vanguard Health Management PAC

Mailing Address 20 Burton Hills Blvd.
Suite 100

City State Zip Code
Nashville TN 37215-6154

FEC ID number of contributing
federal political committee. **C** C00380402

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60109.C15192

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

136750.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 / 152

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Alfa Mutual Insurance Company

Mailing Address 2108 East South Boulevard

City Montgomery State AL Zip Code 36116-

Purpose of Disbursement

Airfare

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3616

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

876.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

AIRFARE

Full Name (Last, First, Middle Initial)

B. Raymond Allen

Mailing Address 4409 Old Fox Trl

City Midlothian State VA Zip Code 23112-

Purpose of Disbursement

Payroll

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3559

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

3776.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

C. Raymond Allen

Mailing Address 4409 Old Fox Trl

City Midlothian State VA Zip Code 23112-

Purpose of Disbursement

Payroll

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3591

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

3776.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

8429.60

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Raymond Allen		Transaction ID: 60120.E3644 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	0		2	0	0	5														
Mailing Address 4409 Old Fox Trl		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">3776.50</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		3776.50																			
3776.50																							
City Midlothian State VA Zip Code 23112-	Purpose of Disbursement Payroll Candidate Name	001 Category/ Type	PAYROLL																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
B. Full Name (Last, First, Middle Initial) AP&M		Transaction ID: 60110.E3547 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	4		2	0	0	5														
Mailing Address 3420 Pump Road #116		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1079.05</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		1079.05																			
1079.05																							
City Richmond State VA Zip Code 23233-	Purpose of Disbursement Campaign Materials Candidate Name	006 Category/ Type	CAMPAIGN MATERIALS																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
C. Full Name (Last, First, Middle Initial) Aristotle International, Inc.		Transaction ID: 60109.E3534 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		2	3		2	0	0	5														
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">109.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		109.00																			
109.00																							
City Washington State DC Zip Code 20003-	Purpose of Disbursement Credit Card Service Fees Candidate Name	001 Category/ Type	CREDIT CARD SERVICE FEES																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Disbursements This Page (optional)

4964.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3657

Date of Disbursement

12 / 29 / 2005

Amount of Each Disbursement this Period

79.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P. O. Box 5270

City Carol Stream State IL Zip Code 60197-5270

Purpose of Disbursement

Credit Card: See Below

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3528

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

114.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 8045 W. Broad St.

City Richmond State VA Zip Code 23294-

Purpose of Disbursement

Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3529

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

90.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

193.56

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Best Buy

Mailing Address P.O. Box 949

City Minneapolis State MN Zip Code 55440-

Purpose of Disbursement
Office Equipment

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3517

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	5

Amount of Each Disbursement this Period

726.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE EQUIPMENT

Full Name (Last, First, Middle Initial)

B. Frances Boswell

Mailing Address 5005 Hearthstone Ct.

City Glen Allen State VA Zip Code 23059-

Purpose of Disbursement
Campaign Consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3633

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	5

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING

Full Name (Last, First, Middle Initial)

C. Broad Street West Mini Storage

Mailing Address 3950 Deep Rock Rd.

City Richmond State VA Zip Code 23233-

Purpose of Disbursement
Storage Fee

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 51006.E3419

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	5

Amount of Each Disbursement this Period

62.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STORAGE FEE

SUBTOTAL of Disbursements This Page (optional)

1788.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Broad Street West Mini Storage

Mailing Address 3950 Deep Rock Rd.

City Richmond State VA Zip Code 23233-

Purpose of Disbursement
Storage Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60110.E3548

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

62.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STORAGE FEE

Full Name (Last, First, Middle Initial)

B. Broad Street West Mini Storage

Mailing Address 3950 Deep Rock Rd.

City Richmond State VA Zip Code 23233-

Purpose of Disbursement
Storage Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3604

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

62.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STORAGE FEE

Full Name (Last, First, Middle Initial)

C. Broad Street West Mini Storage

Mailing Address 3950 Deep Rock Rd.

City Richmond State VA Zip Code 23233-

Purpose of Disbursement
Storage Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3648

Date of Disbursement

12 / 30 / 2005

Amount of Each Disbursement this Period

62.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STORAGE FEE

SUBTOTAL of Disbursements This Page (optional)

186.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Melissa Burch

Mailing Address 13007 Edgetree Ct.

City
MidlothianState
VAZip Code
23113-Purpose of Disbursement
Campaign Consulting

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3643

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 First St. SE

City
WashingtonState
DCZip Code
20003-Purpose of Disbursement
Holiday Dues

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3523

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HOLIDAY DUES

Full Name (Last, First, Middle Initial)

C. Capitol Hill Club

Mailing Address 300 First St. SE

City
WashingtonState
DCZip Code
20003-Purpose of Disbursement
Meeting Expense - Meals

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3583

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	5

Amount of Each Disbursement this Period

31.93

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEETING EXPENSE - MEALS

SUBTOTAL of Disbursements This Page (optional)

281.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. CareFirst Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance Premium

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60110.E3544

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

180.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE PREMIUM

Full Name (Last, First, Middle Initial)

B. CareFirst Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance Premium

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3624

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

180.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE PREMIUM

Full Name (Last, First, Middle Initial)

C. CareFirst Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance Premium

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3625

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

180.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE PREMIUM

SUBTOTAL of Disbursements This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Chartwells Full Name (Last, First, Middle Initial) Mailing Address Randolph-Macon College City Ashland State VA Zip Code 23005- Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60110.E3543 Date of Disbursement 10 / 24 / 2005 Amount of Each Disbursement this Period 1165.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT CATERING
B. CLS Worldwide Services Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 826152 City Philadelphia State PA Zip Code 19182-6152 Purpose of Disbursement Event Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3810 Date of Disbursement 12 / 21 / 2005 Amount of Each Disbursement this Period 32111.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT SERVICES
C. Carol Comstock Full Name (Last, First, Middle Initial) Mailing Address 12720 Glenkirk Rd. City Richmond State VA Zip Code 23233- Purpose of Disbursement Campaign Consulting Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60109.E3533 Date of Disbursement 11 / 02 / 2005 Amount of Each Disbursement this Period 181.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING EXPENSES

SUBTOTAL of Disbursements This Page (optional)

33459.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Carol Comstock		Transaction ID: 60120.E3571 Date of Disbursement <div> <div>11</div> <div>02</div> <div>2005</div> </div>
Mailing Address 12720 Glenkirk Rd.		Amount of Each Disbursement this Period <div>3500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING
City Richmond State VA Zip Code 23233-	Purpose of Disbursement Campaign Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div>001</div> Category/Type		
B. Full Name (Last, First, Middle Initial) Carol Comstock		Transaction ID: 60120.E3595 Date of Disbursement <div> <div>11</div> <div>30</div> <div>2005</div> </div>
Mailing Address 12720 Glenkirk Rd.		Amount of Each Disbursement this Period <div>3000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING
City Richmond State VA Zip Code 23233-	Purpose of Disbursement Campaign Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div>001</div> Category/Type		
C. Full Name (Last, First, Middle Initial) Carol Comstock		Transaction ID: 60120.E3638 Date of Disbursement <div> <div>12</div> <div>20</div> <div>2005</div> </div>
Mailing Address 12720 Glenkirk Rd.		Amount of Each Disbursement this Period <div>3500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BONUS
City Richmond State VA Zip Code 23233-	Purpose of Disbursement Bonus Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<div>001</div> Category/Type		

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Carol Comstock		Transaction ID: 60120.E3637 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 0 5</div> </div>	
Mailing Address 12720 Glenkirk Rd.		Amount of Each Disbursement this Period <div> <div></div> <div>3500.00</div> </div>	
City Richmond State VA Zip Code 23233-	Purpose of Disbursement Campaign Consulting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<div>001</div> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN CONSULTING
B. Full Name (Last, First, Middle Initial) Creative Direct		Transaction ID: 60109.E3522 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 4 / 2 0 0 5</div> </div>	
Mailing Address The Reagan Building 25 E. Main Street		Amount of Each Disbursement this Period <div> <div></div> <div>725.00</div> </div>	
City Richmond State VA Zip Code 23219-	Purpose of Disbursement Rent and Utilities	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<div>001</div> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	RENT AND UTILITIES
C. Full Name (Last, First, Middle Initial) Creative Direct		Transaction ID: 60120.E3570 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 5</div> </div>	
Mailing Address The Reagan Building 25 E. Main Street		Amount of Each Disbursement this Period <div> <div></div> <div>725.00</div> </div>	
City Richmond State VA Zip Code 23219-	Purpose of Disbursement Rent and Utilities	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<div>001</div> Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	RENT AND UTILITIES

SUBTOTAL of Disbursements This Page (optional)

4950.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Creative Direct

Mailing Address The Reagan Building
25 E. Main Street

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3584

Date of Disbursement

11 / 16 / 2005

Amount of Each Disbursement this Period

400.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

B. Creative Direct

Mailing Address The Reagan Building
25 E. Main Street

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Rent and Utilities

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3603

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

725.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RENT AND UTILITIES

Full Name (Last, First, Middle Initial)

C. Creative Web Designs

Mailing Address 2803 Sagecreek Ct.

City Midlothian State VA Zip Code 23112-4237

Purpose of Disbursement
Website Hosting & Development

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3513

Date of Disbursement

10 / 11 / 2005

Amount of Each Disbursement this Period

850.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEBSITE HOSTING & DEVELOP-
MENT

SUBTOTAL of Disbursements This Page (optional)

1975.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Creative Web Designs

Mailing Address 2803 Sagecreek Ct.

City Midlothian State VA Zip Code 23112-4237

Purpose of Disbursement
Website Hosting & Development

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3575

Date of Disbursement

11 / 04 / 2005

Amount of Each Disbursement this Period

2668.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEBSITE HOSTING & DEVELOPMENT

Full Name (Last, First, Middle Initial)

B. Creative Web Designs

Mailing Address 2803 Sagecreek Ct.

City Midlothian State VA Zip Code 23112-4237

Purpose of Disbursement
Website Hosting & Development

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3609

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEBSITE HOSTING & DEVELOPMENT

Full Name (Last, First, Middle Initial)

C. DC Dept. of Taxation

Mailing Address Office of Tax and Revenue
P.O. Box 7792

City Washington State DC Zip Code 20044-7792

Purpose of Disbursement
DC Withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3555

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

676.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DC WITHHOLDINGS

SUBTOTAL of Disbursements This Page (optional)

4844.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. DC Dept. of TaxationMailing Address Office of Tax and Revenue
P.O. Box 7792

City Washington State DC Zip Code 20044-7792

Purpose of Disbursement

DC Withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3587

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

901.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DC WITHHOLDINGS

Full Name (Last, First, Middle Initial)

B. DC Dept. of TaxationMailing Address Office of Tax and Revenue
P.O. Box 7792

City Washington State DC Zip Code 20044-7792

Purpose of Disbursement

DC Withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3642

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

518.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DC WITHHOLDINGS

Full Name (Last, First, Middle Initial)

C. EHK Associates

Mailing Address 16 South 2nd Street

City Richmond State VA Zip Code 23219-

Purpose of Disbursement

Monthly Parking

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3526

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

130.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MONTHLY PARKING

SUBTOTAL of Disbursements This Page (optional)

1549.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. EHK Associates

Mailing Address 16 South 2nd Street

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Monthly Parking

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3568

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

130.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MONTHLY PARKING

Full Name (Last, First, Middle Initial)

B. EHK Associates

Mailing Address 16 South 2nd Street

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Monthly Parking

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3623

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

130.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MONTHLY PARKING

Full Name (Last, First, Middle Initial)

C. Epiphany Productions

Mailing Address Ms. Julie Conway
104 E. Hume Ave.

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
Event Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3660

Date of Disbursement

12 / 27 / 2005

Amount of Each Disbursement this Period

456.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT CATERING

SUBTOTAL of Disbursements This Page (optional)

716.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Event Specialties Co.

Mailing Address Jimmy Oliver
15168 Horseshoe Bridge Rd.

City Ashland State VA Zip Code 23005-

Purpose of Disbursement

Music for Event

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3634

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MUSIC FOR EVENT

Full Name (Last, First, Middle Initial)

B. First Class Balloons

Mailing Address 12217 Hilshire Ct.

City Glen Allen State VA Zip Code 23059-

Purpose of Disbursement

Balloons for Event

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3521

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

48.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BALLOONS FOR EVENT

Full Name (Last, First, Middle Initial)

C. First Class Balloons

Mailing Address 12217 Hilshire Ct.

City Glen Allen State VA Zip Code 23059-

Purpose of Disbursement

Balloons for Event

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60110.E3546

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

456.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BALLOONS FOR EVENT

SUBTOTAL of Disbursements This Page (optional)

1004.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. G.R. Seppala & Associates

Mailing Address 1161 Wayzata Blvd. E.
Box 210

City State Zip Code
Wayzata MN 55391-

Purpose of Disbursement
Fundraising Consulting Expenses

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3585

Date of Disbursement

11 / 17 / 2005

Amount of Each Disbursement this Period

8425.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

**FUNDRAISING CONSULTING EX-
PENSES**

Full Name (Last, First, Middle Initial)

B. G.R. Seppala & Associates

Mailing Address 1161 Wayzata Blvd. E.
Box 210

City State Zip Code
Wayzata MN 55391-

Purpose of Disbursement
Fundraising Consulting Expenses

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3630

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

4518.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

**FUNDRAISING CONSULTING EX-
PENSES**

Full Name (Last, First, Middle Initial)

C. GMD Technologies

Mailing Address 4901 Seminary Road, Suite #907

City State Zip Code
Alexandria VA 22311-

Purpose of Disbursement
Information Technology Support

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3567

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

304.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

**INFORMATION TECHNOLOGY SU-
PPORT**

SUBTOTAL of Disbursements This Page (optional)

13249.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. GMD Technologies

Mailing Address 4901 Seminary Road, Suite #907

City Alexandria State VA Zip Code 22311-

Purpose of Disbursement
Information Technology Support

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3597

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

613.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

INFORMATION TECHNOLOGY SU-
PPORT

Full Name (Last, First, Middle Initial)

B. Groome Transportation

Mailing Address 5500 Lewis Road

City Sandston State VA Zip Code 23150-

Purpose of Disbursement
Event Transportation

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60110.E3538

Date of Disbursement

10 / 20 / 2005

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT TRANSPORTATION

Full Name (Last, First, Middle Initial)

C. Groome Transportation

Mailing Address 5500 Lewis Road

City Sandston State VA Zip Code 23150-

Purpose of Disbursement
Event Transportation

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3574

Date of Disbursement

11 / 04 / 2005

Amount of Each Disbursement this Period

864.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT TRANSPORTATION

SUBTOTAL of Disbursements This Page (optional)

1652.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Hospital Corporation Of America		Transaction ID: 60110.E3537 Date of Disbursement <div> <div>10</div> <div>14</div> <div>2005</div> </div>	
Mailing Address One Park Plaza		Amount of Each Disbursement this Period <div>1224.00</div>	
City Nashville State TN Zip Code 37203-	Purpose of Disbursement Airfare Candidate Name	002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE	
B. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 51006.E3444 Date of Disbursement <div> <div>10</div> <div>05</div> <div>2005</div> </div>	
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>583.55</div>	
City Washington State DC Zip Code 20009-	Purpose of Disbursement Reimb. for Event Expenses Candidate Name	003 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMB. FOR EVENT EXPENSES	
C. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3558 Date of Disbursement <div> <div>10</div> <div>26</div> <div>2005</div> </div>	
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>53.00</div>	
City Washington State DC Zip Code 20009-	Purpose of Disbursement Parking Expenses Candidate Name	001 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PARKING EXPENSES	

SUBTOTAL of Disbursements This Page (optional)

1860.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3561 Date of Disbursement <div> <div>10</div> <div>28</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>4164.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Payroll Candidate Name	<div>001</div> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3560 Date of Disbursement <div> <div>10</div> <div>28</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>3309.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BONUS
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Bonus Candidate Name	<div>001</div> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3592 Date of Disbursement <div> <div>11</div> <div>30</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>4257.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Payroll Candidate Name	<div>001</div> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

11732.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3593 Date of Disbursement <div> <div>11</div> <div>30</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>26.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PARKING EXPENSE
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Parking Expense	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3631 Date of Disbursement <div> <div>12</div> <div>30</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>1933.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BONUS
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Bonus	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jennifer Jones		Transaction ID: 60120.E3632 Date of Disbursement <div> <div>12</div> <div>30</div> <div>2005</div> </div>
Mailing Address 1823 Kalorama Rd., NW		Amount of Each Disbursement this Period <div>4567.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
City Washington State DC Zip Code 20009-		
Purpose of Disbursement Payroll	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

6527.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Thomas Knapp Full Name (Last, First, Middle Initial) Mailing Address 1310 Twentieth Street Suite 150 City Santa Monica State CA Zip Code 90404- Purpose of Disbursement Event Expense - Golf Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60110.E3536 Date of Disbursement 10 / 14 / 2005 Amount of Each Disbursement this Period 1874.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT EXPENSE - GOLF
B. Thomas Knapp Full Name (Last, First, Middle Initial) Mailing Address 1310 Twentieth Street Suite 150 City Santa Monica State CA Zip Code 90404- Purpose of Disbursement Event Expense - Golf Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3564 Date of Disbursement 11 / 01 / 2005 Amount of Each Disbursement this Period 378.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT EXPENSE - GOLF
C. Leonardos Catering Full Name (Last, First, Middle Initial) Mailing Address 2118 McKay Street City Falls Church State VA Zip Code 22043- Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3629 Date of Disbursement 12 / 14 / 2005 Amount of Each Disbursement this Period 395.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT CATERING

SUBTOTAL of Disbursements This Page (optional)

2647.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Lythos, Inc.			Transaction ID: 60110.E3539 Date of Disbursement <div> <div>10</div> <div>21</div> <div>2005</div> </div>	
Mailing Address 105 South Foushee Street				
City Richmond	State VA	Zip Code 23220-	Amount of Each Disbursement this Period <div>2592.98</div>	
Purpose of Disbursement Printing		<div>001</div> Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PRINTING	
State:	District:			
B. Full Name (Last, First, Middle Initial) Lythos, Inc.			Transaction ID: 60120.E3647 Date of Disbursement <div> <div>12</div> <div>30</div> <div>2005</div> </div>	
Mailing Address 105 South Foushee Street				
City Richmond	State VA	Zip Code 23220-	Amount of Each Disbursement this Period <div>1765.05</div>	
Purpose of Disbursement Printing		<div>001</div> Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PRINTING	
State:	District:			
C. Full Name (Last, First, Middle Initial) Marcus & Allen, LLC			Transaction ID: 51006.E3443 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div>	
Mailing Address 25 E. Main Street Suite 200				
City Richmond	State VA	Zip Code 23219-	Amount of Each Disbursement this Period <div>541.40</div>	
Purpose of Disbursement Campaign Consulting Expenses		<div>001</div> Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN CONSULTING EXPEN- SES	
State:	District:			

SUBTOTAL of Disbursements This Page (optional)

4899.43

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Marcus & Allen, LLCMailing Address 25 E. Main Street
Suite 200

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Campaign Consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 51006.E3442

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	5

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING

Full Name (Last, First, Middle Initial)

B. Marcus & Allen, LLCMailing Address 25 E. Main Street
Suite 200

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Campaign Consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3565

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	0	5

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING

Full Name (Last, First, Middle Initial)

C. Marcus & Allen, LLCMailing Address 25 E. Main Street
Suite 200

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Campaign Consulting Expenses

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3566

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	0	5

Amount of Each Disbursement this Period

590.67

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53CAMPAIGN CONSULTING EXPEN-
SES

SUBTOTAL of Disbursements This Page (optional)

5590.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Marcus & Allen, LLC

Mailing Address 25 E. Main Street
Suite 200

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Campaign Consulting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3607

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING

Full Name (Last, First, Middle Initial)

B. Marcus & Allen, LLC

Mailing Address 25 E. Main Street
Suite 200

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Campaign Consulting Expenses

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3608

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

551.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN CONSULTING EXPEN-
SES

Full Name (Last, First, Middle Initial)

C. MBNA

Mailing Address P.O. Box 15287

City Wilmington State DE Zip Code 19886-5287

Purpose of Disbursement
Credit Card: See Below

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3514

Date of Disbursement

10 / 11 / 2005

Amount of Each Disbursement this Period

1608.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

4659.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Office Max Full Name (Last, First, Middle Initial) Mailing Address 6301 W. Broad St. City Richmond State VA Zip Code 23230- Purpose of Disbursement Computer Equipment and Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60109.E3515 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>1608.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: COMPUTER EQUIPMENT AND SOFTWARE
B. Minneapolis Club Full Name (Last, First, Middle Initial) Mailing Address 729 2nd Ave. S City Minneapolis State MN Zip Code 55402- Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60110.E3541 Date of Disbursement <div> <div>10</div> <div>24</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>1953.56</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT CATERING
C. Northrup Grumman Full Name (Last, First, Middle Initial) Mailing Address 1000 Wilson Blvd. Suite 2300 City Arlington State VA Zip Code 22209- Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3617 Date of Disbursement <div> <div>12</div> <div>12</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>1894.60</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AIRFARE

SUBTOTAL of Disbursements This Page (optional)

3848.16

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. NOVA Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
Credit Card Service Fees

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 51006.E3448

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	5

Amount of Each Disbursement this Period

87.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD SERVICE FEES

Full Name (Last, First, Middle Initial)

B. NOVA Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
Credit Card Service Fees

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3535

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

36.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD SERVICE FEES

Full Name (Last, First, Middle Initial)

C. NOVA Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3658

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional)

158.44

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Occasions Caterers

Mailing Address 910 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Event Catering

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3651

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

2266.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT CATERING

B. Platinum Plus VISA

Mailing Address P. O. Box 15469

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement

Credit Card: See Below

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 51006.E3441

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	5

Amount of Each Disbursement this Period

6456.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD:SEE BELOW

C. Alaska Airlines

Mailing Address P.O. Box 68900

City Seattle State WA Zip Code 98168-

Purpose of Disbursement

Airfare

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3681

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	5

Amount of Each Disbursement this Period

410.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

8722.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Beverly Hills Hotel & Bungalows

Mailing Address 9641 Sunset Boulevard

City State Zip Code
Beverly Hills CA 90210-

Purpose of Disbursement
Lodging

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3678

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

560.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LODGING

Full Name (Last, First, Middle Initial)

B. Branders.Com

Mailing Address 1850 Gateway Drive
Suite 400

City State Zip Code
San Mateo CA 94404-

Purpose of Disbursement
Event Supplies

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3701

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

1320.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

C. Capitol Hill Club

Mailing Address 300 First St. SE

City State Zip Code
Washington DC 20003-

Purpose of Disbursement
Event Catering

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3689

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

646.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Chez Foushee		Transaction ID: 60120.E3692 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div>	
Mailing Address 203 N. Foushee Street		Amount of Each Disbursement this Period <div>87.00</div>	
City Richmond State VA Zip Code 23220-	Purpose of Disbursement Meeting Expense - Meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	<div>001</div> Category/Type	[MEMO ITEM] MEMO: MEETING EXPENSE - MEALS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Constant Contact		Transaction ID: 60120.E3698 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div>	
Mailing Address Reservoir Place 1601 Trapelo Road, Suite 246		Amount of Each Disbursement this Period <div>100.00</div>	
City Waltham State MA Zip Code 02451-	Purpose of Disbursement Email Programming	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	<div>001</div> Category/Type	[MEMO ITEM] MEMO: EMAIL PROGRAMMING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Delta Airlines		Transaction ID: 60120.E3690 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div>	
Mailing Address P. O. Box 20706		Amount of Each Disbursement this Period <div>430.41</div>	
City Atlanta State GA Zip Code 30320-	Purpose of Disbursement Airfare	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	<div>002</div> Category/Type	[MEMO ITEM] MEMO: AIRFARE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3700 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 3 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>16.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3699 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 3 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>23.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3674 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 3 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>31.81</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 805 Glenburnie Rd. City Richmond State VA Zip Code 23226- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3694 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>1110.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
B. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 805 Glenburnie Rd. City Richmond State VA Zip Code 23226- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3675 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>37.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
C. RCN Internet Service Full Name (Last, First, Middle Initial) Mailing Address 7921 Woodruff Ct. City Springfield State VA Zip Code 22151- Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3673 Date of Disbursement <div> <div>10</div> <div>03</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>39.90</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: INTERNET SERVICE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 8045 W. Broad St.

City Richmond State VA Zip Code 23294-

Purpose of Disbursement

Event Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3695

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

105.86

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 8045 W. Broad St.

City Richmond State VA Zip Code 23294-

Purpose of Disbursement

Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3691

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

160.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 8045 W. Broad St.

City Richmond State VA Zip Code 23294-

Purpose of Disbursement

Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3696

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

131.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Starbucks Coffee Co. Full Name (Last, First, Middle Initial) Mailing Address Capital Hill DC City Washington State DC Zip Code 20003- Purpose of Disbursement Coffee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3671 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>59.95</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: COFFEE	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	59.95
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
59.95																							
B. US Airways Full Name (Last, First, Middle Initial) Mailing Address 2345 Crystal Dr. City Arlington State VA Zip Code 22227- Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3668 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>330.30</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: AIRFARE	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	330.30
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
330.30																							
C. Xpedx Full Name (Last, First, Middle Initial) Mailing Address 2171 Tomlynn St. City Richmond State VA Zip Code 23230- Purpose of Disbursement Paper & Envelopes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3693 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>90.69</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: PAPER & ENVELOPES	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	5	90.69
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	5														
90.69																							
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																				
0.00																							
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																					

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Platinum Plus VISA

Mailing Address P. O. Box 15469

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement

Credit Card: See Below

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3512

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

1273.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Beau-Coup

Mailing Address 274 Castro Street

City Mountain View State CA Zip Code 94041-

Purpose of Disbursement

Event Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3662

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

621.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

C. Kinkos

Mailing Address 10236 W. Broad Street

City Glen Allen State VA Zip Code 23060-

Purpose of Disbursement

Event Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3665

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

184.28

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

1273.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Name Badge Productions

Mailing Address 6213 Middleton Springs Drive

City Middleton State WI Zip Code 53562-

Purpose of Disbursement
Event Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3663

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

371.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

B. Panera Bread

Mailing Address 11700 W. Broad Street

City Richmond State VA Zip Code 23233-

Purpose of Disbursement
Meeting Expenses - Coffee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3664

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

6.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSES -
COFFEE

Full Name (Last, First, Middle Initial)

C. Platinum Plus VISA

Mailing Address P. O. Box 15469

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement
Finance Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3666

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

89.91

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FINANCE CHARGE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Platinum Plus VISA

Mailing Address P. O. Box 15469

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3556

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

10964.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Budget Rent A Car

Mailing Address 3600 Wilshire Blvd., #100

City Los Angeles State CA Zip Code 90010-

Purpose of Disbursement
Car Rental

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3727

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

284.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

Full Name (Last, First, Middle Initial)

C. CVS

Mailing Address 661 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3714

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

82.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

10964.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Constant Contact

Mailing Address Reservoir Place
1601 Trapelo Road, Suite 246

City Waltham State MA Zip Code 02451-

Purpose of Disbursement

Email Programming

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3753

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EMAIL PROGRAMMING

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address P. O. Box 20706

City Atlanta State GA Zip Code 30320-

Purpose of Disbursement

Airfare

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3704

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

450.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3610 Hacks Cross Road
Building A, First Floor

City Memphis State TN Zip Code 38120-

Purpose of Disbursement

Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3747

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

16.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3743 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>71.42</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3741 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>17.11</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3736 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>40.16</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3737 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>21.92</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3742 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>56.27</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3732 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>23.55</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3734 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	5		2	0	0	5													
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <table border="1"> <tr> <td>23.55</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING	23.55																			
23.55																						
City Memphis State TN Zip Code 38120-																						
Purpose of Disbursement Shipping Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3735 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	5		2	0	0	5													
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <table border="1"> <tr> <td>40.16</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING	40.16																			
40.16																						
City Memphis State TN Zip Code 38120-																						
Purpose of Disbursement Shipping Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3733 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	5		2	0	0	5													
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <table border="1"> <tr> <td>19.09</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING	19.09																			
19.09																						
City Memphis State TN Zip Code 38120-																						
Purpose of Disbursement Shipping Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3746 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>19.09</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3744 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>24.02</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3739 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>79.10</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3745 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>16.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <div>001</div>
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3740 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>49.25</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <div>001</div>
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3738 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>21.92</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <div>001</div>
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. FedEx Kinkos Full Name (Last, First, Middle Initial) Mailing Address 835 Wilshire Blvd. City Los Angeles State CA Zip Code 90017- Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3725 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 406.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT SUPPLIES
B. K Chocolatier Full Name (Last, First, Middle Initial) Mailing Address 9606 Little Santa Monica Blvd. City Beverly Hills State CA Zip Code 90210- Purpose of Disbursement Gift for Event Host Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3749 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 60.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: GIFT FOR EVENT HOST
C. Kinkos Full Name (Last, First, Middle Initial) Mailing Address 10236 W. Broad Street City Glen Allen State VA Zip Code 23060- Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3730 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 67.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Kinkos Full Name (Last, First, Middle Initial) Mailing Address 10236 W. Broad Street City Glen Allen State VA Zip Code 23060- Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3731 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 45.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT SUPPLIES
B. Oceanaire Seafood Room Full Name (Last, First, Middle Initial) Mailing Address 1201 F St. NW City Washington State DC Zip Code 20004- Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3717 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 4224.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT CATERING
C. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 805 Glenburnie Rd. City Richmond State VA Zip Code 23226- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3718 Date of Disbursement 10 / 25 / 2005 Amount of Each Disbursement this Period 59.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 805 Glenburnie Rd. City Richmond State VA Zip Code 23226- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3715 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>3.85</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
B. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 805 Glenburnie Rd. City Richmond State VA Zip Code 23226- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3719 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>64.19</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
C. RCN Internet Service Full Name (Last, First, Middle Initial) Mailing Address 7921 Woodruff Ct. City Springfield State VA Zip Code 22151- Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3712 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>39.90</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: INTERNET SERVICE
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>
TOTAL This Period (last page this line number only)		

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Richmond Airport Parking

Mailing Address 1 Richard E. Byrd Terminal Drive

City Richmond State VA Zip Code 23250-2400

Purpose of Disbursement
Parking

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3710

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	5

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PARKING

Full Name (Last, First, Middle Initial)

B. Richmond Airport Parking

Mailing Address 1 Richard E. Byrd Terminal Drive

City Richmond State VA Zip Code 23250-2400

Purpose of Disbursement
Parking

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3707

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	5

Amount of Each Disbursement this Period

19.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PARKING

Full Name (Last, First, Middle Initial)

C. Safeway

Mailing Address 415 14th St. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Office Supplies

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3702

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	5

Amount of Each Disbursement this Period

78.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Staples Full Name (Last, First, Middle Initial) Mailing Address 8045 W. Broad St. City Richmond State VA Zip Code 23294- Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3716 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>72.40</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT SUPPLIES
B. Staples Full Name (Last, First, Middle Initial) Mailing Address 8045 W. Broad St. City Richmond State VA Zip Code 23294- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3729 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>206.57</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
C. Staples Full Name (Last, First, Middle Initial) Mailing Address 8045 W. Broad St. City Richmond State VA Zip Code 23294- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3728 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>83.96</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Staples Full Name (Last, First, Middle Initial) Mailing Address 4641 Santa Monica Blvd City Los Angeles State CA Zip Code 90029- Purpose of Disbursement Office Equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3750 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>1020.02</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE EQUIPMENT
B. Starbucks Coffee Co. Full Name (Last, First, Middle Initial) Mailing Address Capital Hill DC City Washington State DC Zip Code 20003- Purpose of Disbursement Meeting Expense - Coffee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3703 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>12.87</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEETING EXPENSE - COFFEE
C. Target Full Name (Last, First, Middle Initial) Mailing Address 10820 Jefferson Blvd. City Culver City State CA Zip Code 90230- Purpose of Disbursement Paper Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3723 Date of Disbursement <div> <div>10</div> <div>25</div> <div>2005</div> </div> Amount of Each Disbursement this Period <div>460.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: PAPER SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. The Mondrian Hotel

Mailing Address 8440 Sunset Blvd.

City West Hollywood State CA Zip Code 90069-

Purpose of Disbursement
Meals

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3711

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

42.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. The Oval Room

Mailing Address 800 Connecticut Ave., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
Meeting Expense - Meals

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3713

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

165.78

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE -
MEALS

Full Name (Last, First, Middle Initial)

C. Thrifty Car Rental

Mailing Address 5440 W. Century Blvd.

City Los Angeles State CA Zip Code 90045-

Purpose of Disbursement
Rental Car

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3756

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

461.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: RENTAL CAR

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. U. S. House Members Dining Room

Mailing Address The Capitol

City Washington State DC Zip Code 20515-

Purpose of Disbursement

Meeting Expense - Meals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3708

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

75.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE -
MEALS

Full Name (Last, First, Middle Initial)

B. U. S. House Members Dining Room

Mailing Address The Capitol

City Washington State DC Zip Code 20515-

Purpose of Disbursement

Meeting Expense - Meals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3705

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

89.55

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE -
MEALS

Full Name (Last, First, Middle Initial)

C. U. S. House of Rep. Shop

Mailing Address The Capitol

City Washington State DC Zip Code 20515-

Purpose of Disbursement

Gift for Event Host

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3709

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

69.53

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFT FOR EVENT HOST

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement
Travel Agent Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3755

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL AGENT FEES

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement
Travel Agent Fees

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3754

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL AGENT FEES

Full Name (Last, First, Middle Initial)

C. Wallys

Mailing Address 2107 Westwood Blvd.

City Los Angeles State CA Zip Code 90025-

Purpose of Disbursement
Event Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3724

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

1105.48

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Platinum Plus VISA

Mailing Address P. O. Box 15469

City Wilmington State DE Zip Code 19886-

Purpose of Disbursement

Credit Card: See Below

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3606

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

13727.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Alis Pizza

Mailing Address 1382 East Capitol Street, NE

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Meeting Expense - Meals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3785

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

72.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE -
MEALS

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address P. O. Box 619612

City Dallas State TX Zip Code 75261-

Purpose of Disbursement

Airfare

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3759

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

436.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

13727.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Best Sedan Service

Mailing Address 1605 Potomac Greens Dr

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement
Car Rental

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3778

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

334.53

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

Full Name (Last, First, Middle Initial)

B. Beverly Hills Hotel & Bungalows

Mailing Address 9641 Sunset Boulevard

City Beverly Hills State CA Zip Code 90210-

Purpose of Disbursement
Event Catering

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3762

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1536.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

C. Budget Rent A Car

Mailing Address 3600 Wilshire Blvd., #100

City Los Angeles State CA Zip Code 90010-

Purpose of Disbursement
Car Rental

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3767

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

88.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Constant Contact

Mailing Address Reservoir Place
1601 Trapelo Road, Suite 246

City Waltham State MA Zip Code 02451-

Purpose of Disbursement
Email Programming

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3807

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EMAIL PROGRAMMING

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3610 Hacks Cross Road
Building A, First Floor

City Memphis State TN Zip Code 38120-

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3793

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

24.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 3610 Hacks Cross Road
Building A, First Floor

City Memphis State TN Zip Code 38120-

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3794

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

23.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3795 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>21.84</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3798 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>33.92</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3799 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>15.59</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3797 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>17.22</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3796 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>34.42</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) FedEx		Transaction ID: 60120.E3792 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 3610 Hacks Cross Road Building A, First Floor		Amount of Each Disbursement this Period <div>34.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
City Memphis State TN Zip Code 38120-		
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Firehook Bakery & Coffee

Mailing Address 912 17th St.

City Washington State DC Zip Code 20009-

Purpose of Disbursement

Event Catering

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3804

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

163.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

B. Freedom RV Rentals

Mailing Address 12141 Washington Hwy

City Ashland State VA Zip Code 23005-

Purpose of Disbursement

Event Transportation

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3787

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

700.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: EVENT TRANSPORTATION

Full Name (Last, First, Middle Initial)

C. Hertz

Mailing Address 207 Porter Street

City Boston State MA Zip Code 02128-

Purpose of Disbursement

Car Rental

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3766

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

129.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: CAR RENTAL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. The Jefferson Hotel

Mailing Address Franklin and Adams Streets

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

Meeting Expense - Meals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3779

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

51.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE -
MEALS

Full Name (Last, First, Middle Initial)

B. Kinkos

Mailing Address 10236 W. Broad Street

City Glen Allen State VA Zip Code 23060-

Purpose of Disbursement

Event Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3800

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

165.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

C. Loews Vanderbilt Hotel

Mailing Address 2100 W End Ave

City Nashville State TN Zip Code 37203-

Purpose of Disbursement

Lodging

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3773

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

518.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Loews Vanderbilt Hotel		Transaction ID: 60120.E3769 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 2100 W End Ave		Amount of Each Disbursement this Period <div>167.76</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: LODGING
City Nashville State TN Zip Code 37203-		
Purpose of Disbursement Lodging		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Loews Vanderbilt Hotel		Transaction ID: 60120.E3772 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 2100 W End Ave		Amount of Each Disbursement this Period <div>13.47</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEALS
City Nashville State TN Zip Code 37203-		
Purpose of Disbursement Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Occasions Caterers		Transaction ID: 60120.E3788 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 910 Pennsylvania Ave. SE		Amount of Each Disbursement this Period <div>3311.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT CATERING
City Washington State DC Zip Code 20003-		
Purpose of Disbursement Event Catering		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Panera Bread

Mailing Address 11700 W. Broad Street

City Richmond State VA Zip Code 23233-

Purpose of Disbursement

Event Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3809

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

251.15

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

B. Postmaster

Mailing Address 805 Glenburnie Rd.

City Richmond State VA Zip Code 23226-

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3775

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Postmaster

Mailing Address 805 Glenburnie Rd.

City Richmond State VA Zip Code 23226-

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3768

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

13.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. RCN Internet Service

Mailing Address 7921 Woodruff Ct.

City Springfield State VA Zip Code 22151-

Purpose of Disbursement
Internet Service

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3784

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

39.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

B. Richmond Airport Parking

Mailing Address 1 Richard E. Byrd Terminal Drive

City Richmond State VA Zip Code 23250-2400

Purpose of Disbursement
Parking

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3777

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PARKING

Full Name (Last, First, Middle Initial)

C. Richmond Airport Parking

Mailing Address 1 Richard E. Byrd Terminal Drive

City Richmond State VA Zip Code 23250-2400

Purpose of Disbursement
Parking

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3781

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PARKING

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Ruths Chris Steak House

Mailing Address 1801 Connecticut Ave., NW

City Washington State DC Zip Code 20009-

Purpose of Disbursement

Event Catering

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3783

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

665.87

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

B. Safeway

Mailing Address 415 14th St. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Office Supplies

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

417.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. Target

Mailing Address 5401 W. Broad St.

City Richmond State VA Zip Code 23230-

Purpose of Disbursement

Office Supplies

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3803

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

100.76

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. The Oval Room

Mailing Address 800 Connecticut Ave., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement

Event Catering

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3806

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

2125.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

B. U. S. House of Rep. Shop

Mailing Address The Capitol

City Washington State DC Zip Code 20515-

Purpose of Disbursement

Event Supplies

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3782

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

706.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement

Airfare

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3780

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

438.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Ukrops Supermarket

Mailing Address 7035 Three Chopt Rd.

City Richmond State VA Zip Code 23226-

Purpose of Disbursement

Event Catering

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3805

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

174.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

B. Ukrops Supermarket

Mailing Address 7035 Three Chopt Rd.

City Richmond State VA Zip Code 23226-

Purpose of Disbursement

Event Catering

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3808

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

53.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

C. Printing Services

Mailing Address 4109 Jacque St.

City Richmond State VA Zip Code 23230-

Purpose of Disbursement

Printing

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3577

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

411.97

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PRINTING

SUBTOTAL of Disbursements This Page (optional)

411.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Risdall Advertising Agency

Mailing Address 550 Main St.

City New Brighton State MN Zip Code 55112-

Purpose of Disbursement
Fundraising Consulting

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3519

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Risdall Advertising Agency

Mailing Address 550 Main St.

City New Brighton State MN Zip Code 55112-

Purpose of Disbursement
Fundraising Consulting Expenses

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3520

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

149.55

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTING EX-
PENSES

Full Name (Last, First, Middle Initial)

C. Risdall Advertising Agency

Mailing Address 550 Main St.

City New Brighton State MN Zip Code 55112-

Purpose of Disbursement
Fundraising Consulting Expenses

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3578

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

601.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTING EX-
PENSES

SUBTOTAL of Disbursements This Page (optional)

4751.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Risdall Advertising Agency

Mailing Address 550 Main St.

City New Brighton State MN Zip Code 55112-

Purpose of Disbursement
Fundraising Consulting

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3582

Date of Disbursement

11 / 16 / 2005

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Risdall Advertising Agency

Mailing Address 550 Main St.

City New Brighton State MN Zip Code 55112-

Purpose of Disbursement
Fundraising Consulting

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3626

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. Wendy Roberts

Mailing Address 6013 Shady Willow Place

City Glen Allen State VA Zip Code 23059-

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3563

Date of Disbursement

10 / 28 / 2005

Amount of Each Disbursement this Period

1123.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

9123.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Wendy Roberts

Mailing Address 6013 Shady Willow Place

City State Zip Code
Glen Allen VA 23059-

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3594

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

863.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

B. Wendy Roberts

Mailing Address 6013 Shady Willow Place

City State Zip Code
Glen Allen VA 23059-

Purpose of Disbursement
Event Supplies - Paper

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3640

Date of Disbursement

12 / 27 / 2005

Amount of Each Disbursement this Period

40.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT SUPPLIES - PAPER

Full Name (Last, First, Middle Initial)

C. Wendy Roberts

Mailing Address 6013 Shady Willow Place

City State Zip Code
Glen Allen VA 23059-

Purpose of Disbursement
Bonus

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3639

Date of Disbursement

12 / 29 / 2005

Amount of Each Disbursement this Period

871.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BONUS

SUBTOTAL of Disbursements This Page (optional)

1775.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Wendy Roberts

Mailing Address 6013 Shady Willow Place

City State Zip Code
Glen Allen VA 23059-

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3645

Date of Disbursement

12 / 30 / 2005

Amount of Each Disbursement this Period

851.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

B. Sam Pedretti Catering

Mailing Address 6442 Bellingham Ave.

City State Zip Code
North Hollywood CA 91606-

Purpose of Disbursement
Event Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60110.E3540

Date of Disbursement

10 / 21 / 2005

Amount of Each Disbursement this Period

971.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENT CATERING

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address P.O. Box 17398

City State Zip Code
Baltimore MD 21297-

Purpose of Disbursement
Phone Service

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60110.E3549

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

201.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)

2024.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 17398 City Baltimore State MD Zip Code 21297- Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60110.E3550 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5 Amount of Each Disbursement this Period 209.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE
B. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 17398 City Baltimore State MD Zip Code 21297- Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3580 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5 Amount of Each Disbursement this Period 209.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE
C. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 17398 City Baltimore State MD Zip Code 21297- Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3598 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5 Amount of Each Disbursement this Period 202.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)

622.14

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 17398 City Baltimore State MD Zip Code 21297- Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3627 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>209.26</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	4	/	2	0	0	5	209.26
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	1	4	/	2	0	0	5														
209.26																							
B. Verizon Wireless Full Name (Last, First, Middle Initial) Mailing Address 7600 Montpelier Rd. City Laurel State MD Zip Code 20723- Purpose of Disbursement Cellular Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60110.E3545 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>268.76</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELLULAR PHONE	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	4	/	2	0	0	5	268.76
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	4	/	2	0	0	5														
268.76																							
C. Verizon Wireless Full Name (Last, First, Middle Initial) Mailing Address 7600 Montpelier Rd. City Laurel State MD Zip Code 20723- Purpose of Disbursement Cellular Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3599 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>279.45</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELLULAR PHONE	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	5	279.45
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	3	0	/	2	0	0	5														
279.45																							
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>757.47</td> </tr> </table>	757.47																				
757.47																							
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																					

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Virginia Department of Taxation

Mailing Address 2220 West Broad Street

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

State Withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3554

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	5

Amount of Each Disbursement this Period

555.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STATE WITHHOLDINGS

Full Name (Last, First, Middle Initial)

B. Virginia Department of Taxation

Mailing Address 2220 West Broad Street

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

State Withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3581

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	5

Amount of Each Disbursement this Period

32.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STATE WITHHOLDINGS

Full Name (Last, First, Middle Initial)

C. Virginia Department of Taxation

Mailing Address 2220 West Broad Street

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

State Withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3586

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	0	5

Amount of Each Disbursement this Period

554.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STATE WITHHOLDINGS

SUBTOTAL of Disbursements This Page (optional)

1141.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)
A. Virginia Department of Taxation

Mailing Address 2220 West Broad Street

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

State Withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3641

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

537.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STATE WITHHOLDINGS

Full Name (Last, First, Middle Initial)
B. Virginia Department of Taxation

Mailing Address 2220 West Broad Street

City Richmond State VA Zip Code 23220-

Purpose of Disbursement

State Withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3652

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

34.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

STATE WITHHOLDINGS

Full Name (Last, First, Middle Initial)
C. Wachovia

Mailing Address P.O. Box 40031

City Roanoke State VA Zip Code 24022-

Purpose of Disbursement

Federal Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 51006.E3439

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

6072.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FEDERAL WITHHOLDING

SUBTOTAL of Disbursements This Page (optional)

6643.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Wachovia Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 40031 City Roanoke State VA Zip Code 24022- Purpose of Disbursement Federal Withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Transaction ID: 60120.E3569 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5 Amount of Each Disbursement this Period 7057.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEDERAL WITHHOLDING
B. Wachovia Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 40031 City Roanoke State VA Zip Code 24022- Purpose of Disbursement Federal Withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Transaction ID: 60120.E3611 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5 Amount of Each Disbursement this Period 5096.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEDERAL WITHHOLDINGS
C. Cindy Wharton Full Name (Last, First, Middle Initial) Mailing Address 12204 Glen Abbey Place City Glen Allen State VA Zip Code 23059- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Transaction ID: 60120.E3562 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5 Amount of Each Disbursement this Period 3955.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional)

16109.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Cindy Wharton Full Name (Last, First, Middle Initial) Mailing Address 12204 Glen Abbey Place City Glen Allen State VA Zip Code 23059- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3590 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5 Amount of Each Disbursement this Period 3955.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
B. Cindy Wharton Full Name (Last, First, Middle Initial) Mailing Address 12204 Glen Abbey Place City Glen Allen State VA Zip Code 23059- Purpose of Disbursement Meeting Expenses-Mileage Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3635 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period 188.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MEETING EXPENSES-MILEAGE MEALS
C. Cindy Wharton Full Name (Last, First, Middle Initial) Mailing Address 12204 Glen Abbey Place City Glen Allen State VA Zip Code 23059- Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3636 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 5 Amount of Each Disbursement this Period 3955.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional)

8099.31

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Wiley, Rein, & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
Legal Consulting Expenses

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3613

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	5

Amount of Each Disbursement this Period

4274.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL CONSULTING EXPENSES

Full Name (Last, First, Middle Initial)

B. Wiley, Rein, & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
Legal Consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3612

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL CONSULTING

Full Name (Last, First, Middle Initial)

C. Wiley, Rein, & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
Legal Consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3614

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	2		2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL CONSULTING

SUBTOTAL of Disbursements This Page (optional)

8274.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Full Name (Last, First, Middle Initial) Wiley, Rein, & Fielding		Transaction ID: 60120.E3615 Date of Disbursement <div> <div>11</div> <div>22</div> <div>2005</div> </div>	
Mailing Address 1776 K Street, NW		Amount of Each Disbursement this Period <div>2.10</div>	
City Washington State DC Zip Code 20006-	Purpose of Disbursement Legal Consulting Expenses Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Wiley, Rein, & Fielding		Transaction ID: 60120.E3655 Date of Disbursement <div> <div>12</div> <div>27</div> <div>2005</div> </div>	
Mailing Address 1776 K Street, NW		Amount of Each Disbursement this Period <div>2000.00</div>	
City Washington State DC Zip Code 20006-	Purpose of Disbursement Legal Consulting Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Wiley, Rein, & Fielding		Transaction ID: 60120.E3656 Date of Disbursement <div> <div>12</div> <div>27</div> <div>2005</div> </div>	
Mailing Address 1776 K Street, NW		Amount of Each Disbursement this Period <div>1.35</div>	
City Washington State DC Zip Code 20006-	Purpose of Disbursement Legal Consulting Expenses Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

2003.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. Dan Williams Full Name (Last, First, Middle Initial) Dan Williams		Transaction ID: 60110.E3542 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 4 / 2 0 0 5</div> </div>
Mailing Address Capitol Hill Press Club Offices 209 Pennsylvania Ave., SE City Washington State DC Zip Code 20003- Purpose of Disbursement Rent and Utilities Candidate Name		Amount of Each Disbursement this Period <div>1006.49</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		001 Category/Type RENT AND UTILITIES
B. Dan Williams Full Name (Last, First, Middle Initial) Dan Williams		Transaction ID: 60120.E3600 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 0 5</div> </div>
Mailing Address Capitol Hill Press Club Offices 209 Pennsylvania Ave., SE City Washington State DC Zip Code 20003- Purpose of Disbursement Rent and Utilities Candidate Name		Amount of Each Disbursement this Period <div>994.88</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		001 Category/Type RENT AND UTILITIES
C. Dan Williams Full Name (Last, First, Middle Initial) Dan Williams		Transaction ID: 60120.E3646 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 5</div> </div>
Mailing Address Capitol Hill Press Club Offices 209 Pennsylvania Ave., SE City Washington State DC Zip Code 20003- Purpose of Disbursement Rent and Utilities Candidate Name		Amount of Each Disbursement this Period <div>996.59</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		001 Category/Type RENT AND UTILITIES

SUBTOTAL of Disbursements This Page (optional)

2997.96

TOTAL This Period (last page this line number only)

231131.20

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. 7th District Republican Committee

Mailing Address 5606 Boynton Place

City
Richmond

State
VA

Zip Code
23225-

Purpose of Disbursement
Transfer of Excess Funds

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3576

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

7000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. 7th District Republican Committee

Mailing Address 5606 Boynton Place

City
Richmond

State
VA

Zip Code
23225-

Purpose of Disbursement
Transfer of Excess Funds

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3516

Date of Disbursement

10 / 13 / 2005

Amount of Each Disbursement this Period

25000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bill Bolling for L.G. Committee

Mailing Address P.O. Box 8205

City
Richmond

State
VA

Zip Code
23226-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60109.E3525

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

42000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Bob Beauprez for Congress

Mailing Address P. O. Box 501

City Wheat Ridge State CO Zip Code 80034-0501

Purpose of Disbursement
ContributionCandidate Name
BOB BEAUPREZ011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 07

Transaction ID: 60109.E3527

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Coble for Congress

Mailing Address P.O. Box 1177

City Greensboro State NC Zip Code 27402-

Purpose of Disbursement
ContributionCandidate Name
JOHN HOWARD COBLE011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 06

Transaction ID: 60120.E3551

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address P. O. Box 20706

City Atlanta State GA Zip Code 30320-

Purpose of Disbursement
AirfareCandidate Name
GUS MICHAEL BILIRAKIS003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: 60131.E3842

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

432.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

SUBTOTAL of Disbursements This Page (optional)

3432.60

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. The Family FoundationMailing Address One Capitol Square
830 E. Main St., Ste. 1201

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
Charitable Donation

Candidate Name

012
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3602

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Friends of Katherine Harris

Mailing Address 610 South Boulevard

City Tampa State FL Zip Code 33606-

Purpose of Disbursement
Contribution

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3618

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Hertz

Mailing Address 207 Porter Street

City Boston State MA Zip Code 02128-

Purpose of Disbursement
Car RentalCandidate Name
JIM GERLACH003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 06

Transaction ID: 60131.E3847

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

212.16

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Car Rental

SUBTOTAL of Disbursements This Page (optional)

4712.16

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Mark Kennedy 06

Mailing Address P.O. Box 49333

City Minneapolis State MN Zip Code 55449-

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3619

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mason for Delegate

Mailing Address 3976 Chain Bridge Road

City Fairfax State VA Zip Code 22030-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3573

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. McDonnell For Virginia

Mailing Address P.O. Box 62386

City Virginia Beach State VA Zip Code 23466-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3601

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

A. McDonnell For Virginia Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 62386 City Virginia Beach State VA Zip Code 23466- Purpose of Disbursement Non Federal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3557 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. McDougle For Virginia Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 187 City Mechanicsville State VA Zip Code 23111- Purpose of Disbursement Non Federal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3622 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 5 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. McHenry for Congress Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 1406 City Hickory State NC Zip Code 28601- Purpose of Disbursement Contribution Candidate Name PATRICK TIMOTHY MCHENRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60120.E3589 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. McHenry for Congress

Mailing Address P.O. Box 1406

City
Hickory

State
NC

Zip Code
28601-

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
PATRICK TIMOTHY MCHENRY

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 10

Transaction ID: 60120.E3588

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Com.

Mailing Address 320 First St., SE

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
Transfer of Excess Funds

011
Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3620

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

42250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Northwest Airlines

Mailing Address 2700 Lone Oak Pkwy.

City
Saint Paul

State
MN

Zip Code
55121-

Purpose of Disbursement
Airfare

011
Category/
Type

Candidate Name
JIM GERLACH

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 06

Transaction ID: 60124.E3827

Date of Disbursement

11 / 17 / 2005

Amount of Each Disbursement this Period

563.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

SUBTOTAL of Disbursements This Page (optional)

44813.39

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Northwest Airlines

Mailing Address 2700 Lone Oak Pkwy.

City Saint Paul State MN Zip Code 55121-

Purpose of Disbursement
AirfareCandidate Name
GUS MICHAEL BILIRAKIS003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: 60131.E3844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

567.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

Full Name (Last, First, Middle Initial)

B. Republican Jewish CoalitionMailing Address 50 F Street NW
Suite 100

City Washington State DC Zip Code 20001-

Purpose of Disbursement
Charitable Contribution

Candidate Name

012
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3621

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Tom Osborne For Governor

Mailing Address P.O. Box 80668

City Lincoln State NE Zip Code 68501-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60120.E3553

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	5

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

11567.40

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Cantor For Congress

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement
AirfareCandidate Name
GUS MICHAEL BILIRAKIS003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: 60131.E3843

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

365.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement
AirfareCandidate Name
JIM GERLACH003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 06

Transaction ID: 60124.E3830

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

288.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 2345 Crystal Dr.

City Arlington State VA Zip Code 22227-

Purpose of Disbursement
AirfareCandidate Name
GUS MICHAEL BILIRAKIS003
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: 60131.E3846

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

294.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

In-Kind: Airfare

SUBTOTAL of Disbursements This Page (optional)

949.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Virginia Conservative Action PAC

Mailing Address 410 North Ridge Rd.

City
Richmond

State
VA

Zip Code
23229-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60120.E3610

Date of Disbursement

12 / 02 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Virginians for Jerry Kilgore

Mailing Address P.O. Box 17098

City
Richmond

State
VA

Zip Code
23226-

Purpose of Disbursement
Non Federal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60109.E3518

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

25000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

27500.00

TOTAL This Period (last page this line number only)

155974.83

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cantor For Congress

Full Name (Last, First, Middle Initial)

A. Isaac Applbaum

Mailing Address 837 Longridge Road

City
Oakland

State
CA

Zip Code
94610-6297

Purpose of Disbursement

Refund of Contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60124.E3841

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2005

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00